



03/30/2006

203-975-4658

CONAIR LEGAL DEPT.

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## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
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7590 01/23/2006

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03/31/2006 TBESHAR2 00000004 501239 10664420

01 FC:1501 1400.00 DA  
 02 FC:1504 300.00 DA  
 03 FC:8001 APPLICATION 5000 DA

FILING DATE

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO.

CONFIRMATION NO.

10/664,420

09/17/2003

Theodore B. Mulic

883.0057USU

3210

TITLE OF INVENTION: OPTICAL INTERLOCK FOR APPLIANCE

| APPLN. TYPE         | SMALL ENTITY                           | ISSUE FEE      | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|---------------------|--|----------------|-----------------|------------------|------------|
| nonprovisional      | <input checked="" type="checkbox"/> NO | \$700-\$1,400- | \$300           | \$400-\$1,700.00 | 04/24/2006 |
| EXAMINER            | ART UNIT                               | CLASS-SUBCLASS |                 |                  |            |
| ALEXANDER, REGINALD | 1761                                   | 099-337000     |                 |                  |            |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached.  
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
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1. LAWRENCE Cruz

2. Steven A. Garner

3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 1.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

CONAIR CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ONE CUMMINGS POINT ROAD  
STAMFORD, CT 06902Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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 A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 501239 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Richard A Margulies  
CONAIR CORPORATION

Typed or printed name By: RICHARD A MARGULIES, VP

Date March 30, 2006

Registration No. \_\_\_\_\_

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